

## **2002 HAWAII STUDENT SURVEY FINDINGS**

**Alcohol lifetime and monthly prevalence rates** had remained relatively unchanged over the years, however a substantial decrease occurred in 2000 and again in 2002. In 2002, lifetime alcohol prevalence reports (e.g., reported use of a substance at least once in a person's lifetime) were 20% for sixth graders, 43% for eighth graders, 65% for tenth graders, and 75% for twelfth graders, down from 24%, 49%, 67%, and 77% reported by students in 2000. Lifetime and monthly alcohol prevalence reports in Hawaii are lower than reports nationwide.

**Tobacco use rates** are at an all-time low in 2002. Lifetime and monthly cigarette prevalence reports in Hawaii had been climbing since 1987, with the largest increase occurring in 1996. Beginning in 1998, continuing in 2000 and again in 2002, cigarette use finally began an encouraging decline. This trend corresponds to trends noted nationwide for cigarette use. Hawaii lifetime cigarette prevalence reports in grades eight (28%), ten (42%) and twelve (49%) are lower than nationwide cigarette prevalence reports in the same grades (31%, 47%, 57%).

**Marijuana** continues to be the most prevalent illicit drug with nearly half of the twelfth graders (46%) reporting they had tried marijuana. In 2002, marijuana prevalence reports held steady for all grades except grade 10. In grade 10, lifetime marijuana prevalence reports increased from 33% in 2000 to 36% in 2002, but remained below 1998 prevalence reports of 39%. In 2002, 3% of sixth graders, 16% of eighth graders, 36% of tenth graders and 46% of twelfth graders reported trying marijuana at some point in their lives. These rates are lower than nationwide reports.

**Methamphetamine use** began to drop in 2000 and held steady in 2002 in grades 8, 10, and 12 at 2%, 4%, and 5%. Prevalence rates in 1989 were more than twice as high at 6%, 10%, and 12% in the same grades. Hawaii student reports for having tried methamphetamine are lower than nationwide reports.

**Drug use rates** are decreasing or stabilizing for all substances except ecstasy. Use rates for most illicit drugs were down in 2000, and again in 2002. At the twelfth grade level, lifetime prevalence reports (e.g., reported use of a substance at least once in a person's lifetime) decreased in 2002 for marijuana, inhalants, methamphetamine, and hallucinogens. At all other grade levels, lifetime prevalence reports generally declined across the board. The exceptions were lifetime prevalence reports for ecstasy, which increased in grades ten and twelve, and for steroids, which remained level in grades eight, ten, and twelve. Lifetime prevalence reports for ecstasy among Hawaii students in 1998 were 3% for grade 8; 4% for grade 10 and 5% for grade 12 compared to 2%, 5%, and 8% in 2000 for the respective grades. In 2002, the rates are 3% for 8<sup>th</sup> grade, 7% for 10<sup>th</sup> and 11% for 12<sup>th</sup>.

**Monthly use of any illicit drug** for all grades increased drastically in 1996 and began to drop in 2000. In 2002, a downward trend continued only in grade 12; in grade 8, reports held steady; and in grades 6 and 10, reports are up 1 to 2 percentage points. Nationwide reports of any monthly illicit drug use are only slightly higher than Hawaii. In Hawaii, 12% of 8<sup>th</sup> graders; 21% of 10<sup>th</sup> graders, and 23% of 12<sup>th</sup> graders have used an illicit drug in the past month compared to nationwide use of 13% by 8<sup>th</sup> graders; 22% by 10<sup>th</sup> graders, and 26% by 12<sup>th</sup> graders.

**Daily use of illicit drugs** is generally nonexistent, except for daily use of marijuana. Hawaii reports of daily marijuana use are similar to nationwide reports in grades 8 (1.6% in Hawaii compared to 1.2% nationwide) and 10 (4.4% in Hawaii compared to 3.9% nationwide), and are slightly lower than nationwide reports in grade 12 (4.8% in Hawaii compared to 6.0% nationwide). In 2002, daily marijuana use increased by 1% in grade 10 and remained unchanged in all other grades.

**Daily use of alcohol** in grades 8 (1.8%) and 10 (2.5%) are slightly higher than nationwide reports in the same grades (0.7% and 1.8%, respectively). However, 12<sup>th</sup> grade reports of daily alcohol use in Hawaii (3.3%) are similar to 12<sup>th</sup> grade reports nationwide (3.5%). Reports of daily alcohol use in Hawaii are similar to reports in 2000.

**Daily use of cigarettes** has been decreasing since 1998 and continues on that downward trajectory for students in upper grades. Daily cigarette use dropped by 2% in grade 10 and by 4% in grade 12. Cigarettes are used on a daily basis by 2% of eighth graders, 5% of tenth graders, and 8% of twelfth graders. In 1996 and 1998, reports of daily cigarette use were approximately twice as high as 2002 reports.

**Estimated statewide substance abuse treatment needs** in 2002 are down from previous years and nearing 1996 estimates. At least 1 out of 10 students in grades 6 through 12 is estimated to need substance abuse treatment. Treatment needs increased drastically from 1996 (10%) to 1998 (16%), but dropped in 2000 (13%) and again in 2002 (11%). In 2002, approximately 11,319 students were determined to have either an alcohol abuse problem, a drug abuse problem or both and need treatment. Substance abuse treatment is needed for 1% of sixth graders, 6% of eighth graders, 16% of tenth graders, and 21% of twelfth graders statewide. Approximately half of the students who need treatment require help for alcohol and drug abuse, rather than for either of these alone. At the county level, the proportion of students in grades 6 through 12 needing treatment is highest in Hawaii and Maui Counties (14% each) and lowest in the City & County of Honolulu (9%), with the need in Kauai County at 13%. However, Honolulu has the largest number of students estimated to need treatment (5,458), followed by Hawaii (1,787), Maui (1,558) and Kauai (671) Counties. Findings from this study indicate that students are much more likely to receive help for a substance abuse problem if they perceive they need help and if they are told by others to get help.

**The 2002 Study assessed a number of risk and protective factors** related to substance use to assist communities in planning effective prevention programs. The risk and protective factor framework addresses measurable risk factors, which are precursors for drug and alcohol problems, and measurable protective factors, which “moderate or buffer” the impact of risk factors by improving coping, adaptation, and competence.

The risk and protective factor framework highlights communities and subgroups that are at greatest risk for developing a substance abuse problem. Comparisons across counties on the risk factor index (i.e. the number of risk factors) show that a greater percentage of students in the City and County of Honolulu (25%) than Hawaii (23%), Kauai (16%) and Maui Counties (18%) are exposed to a high number of risk factors. Comparisons across public school districts on the risk factor index show that Hawaii District has the largest proportion of students with elevated risk on the risk factor index (23%), followed by Windward District (20%), Maui District (19%), Leeward District (16%), Kauai District (15%), Central District (14%) and Honolulu District (12%).

Comparisons across ethnic group show that larger proportions of Native Hawaiians and White students are exposed to a high number of risk factors.

No single risk or protective factor can predict substance abuse. Research-based prevention models suggest prevention efforts should move toward reversing or reducing elevated risk factors and enhancing low protective factors. To learn more about community risk and protective factor rates the district reports from this study are available through the Alcohol and Drug Abuse Division web page [http://www.hawaii.gov/health/resource/drug\\_abuse.html](http://www.hawaii.gov/health/resource/drug_abuse.html)

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